Incorporated Village of Freeport



Joseph Madigan Superintendent of Buildings 46 North Ocean Avenue Freeport, New York 11520 (516) 377-2242 FAX (516) 377-2493

VACANT BUILDING REGISTRATION APPLICATION

Chapter 88 of the Code of the Village of Freeport requires any owner of any building which has been vacant for more than 120 consecutive days shall file with the Building Department, a Vacant Building registration. The owner(s) of the vacant property(ies) shall be responsible to register and pay the annual nonrefundable registration fee of \$250.00 for the first year of vacancy. Thereafter the fees increase in increments of an additional \$250.00 for each year that the property remains vacant. In no instance shall the registration of a vacant building and the payment of the registration fees be construed to exonerate the owner, agent or responsible party from responsibility for compliance with any other building code or housing code requirement.

TIE GAN ALL		
Complete and	d Notarized Application	2
Valid Identif	ication of Applicant:	
•	Corporate Documentation	(
•	Letters Testamentary):
•	Trust Document	
•	Individual Identification	

Registration Fee made payable to:

REGISTRATION REQUIREMENTS

The Village of Freeport and all registrations expire on March 01 of every year.

First Year Fee = \$250.00 Second Year Fee = \$500.00 Third Year Fee = \$750.00 Fourth Year Fee = \$1000.00

Thereafter an additional fee of \$250.00 to be added for each additional year of vacancy.

Incorporated Village of Freeport

Joseph Madigan Superintendent of Buildings 46 North Ocean Avenue Freeport, New York 11520 (516) 377-2242 FAX (516) 377-2493

VACANT BUILDING REGISTRATION APPLICATION

STREET ADDRESS OF PROPERTY BEING REGISTERED (AS LISTED ON DEED):

STREET ADDRESS OF TROPERTY	
Registered Residence Address:	, Freeport, NY 11520.
Section/Block/Lot(s):	

Bank/Lender/Lien Holder:	
Contact:	Contact Phone: ()
Email Address:	
Lender/Lien Holder Mailing Address:	

Property Manager (Nassau County):	_24 Hour Phone: ()
Contact:	24 Hour Phone: ()
Email Address: Property Management Company Mailing	Address:
Please note: if the owner or owners do not re the contact information for a local agent we service of process on behalf of the owners.	reside within the State, the registration statement must also provide tho resides within Nassau County and who is authorized to accept
	ss and telephone number of the executor of the estate.
2). If a trust, the names, addresses and te	lephone number(s) of all trustees and grantors.
3). If a partnership, the names, residence interest of 10% or greater.	addresses and telephone numbers of all partners with an
4). If any other form of unincorporated a telephone numbers of all principals w	ssociation (ie. D/B/A), the names, residence addresses, and with an interest of 10% or greater.
5). If an individual person, the name, res	idence address, and telephone number of that individual person

Name:	Phone number:
Mailing Address:	
	_
the best of my knowledge, information and be	e in this vacant building registration are true and correct to elief, further, I understand that in the event that I have nts, I will be liable for punishment in accordance with all
SIGNATU	IRE:
APPLICANT'S NAI	ME:
	ΓLE:
	Igment of Individual
State of New York)	
County Nassau) SS.:	
evidence to be the individual(s) whose name acknowledged to me that he/she/they execute	in the year 20 before me personally appeared known to me or proved to me on the basis of satisfactory e(s) is (are) subscribed to the within instrument and ed the same in his/her/their capacity(ies), and that by the individual(s), or a person upon behalf of which the
Notary Public	
Acknowledg	gement of Corporation
State of New York) County Nassau) SS.:	
On theday of, to me know	in the year 20 before me personally appeared on, who, being by me duly sworn, did depose and say that (if the place of residence is in a city
include the street and street number, if any, there	(if the place of residence is in a city eof); that he/she/they is (are) the
(president or other officer or director or attorney	y in fact duly appointed) of the (name of corporation), the above instrument; and that he/she/they signed his/her/thei
Notary Public	